

Effective December 29, 1999

Application or Docket Number

091584796

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN OR SMALL ENTITY	
FOR			NUMBER FILED			NUMBER EXTRA		E	FEE)	RATE	FEE
BASIC FEE			-		L				345.00	OR	-	690.00
то	TAL CLAIMS		44	minus 2	20= 24	* 29		9=		OR	X\$18=	Uzz
INDEPENDENT CLAIMS			6	minus			X39			1	X78=	438.50
MULTIPLE DEPENDENT CLAIM PRESENT									 	OR		
* If the difference in column 1 is less than zero, enter "0" in column 2						+130			OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2							ТОТ	AL	نــــا	OR	•	1/22,5
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA	LL I	ENTITY	OR	OTHER SMALL E	ENTITY
AMENDMENT A		REM AF	LAIMS MAINING FTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*		Minus	**	=	X\$ 9	}=		OR	X\$18=	
ME	Independent	*		Minus	***	=	X39) <u> </u>		OR	X78=	
	FIRST PRESE	NTATIO	ON OF ML	JLTIPLE DEI	PENDENT CLAIM		1			1	+260=	
							+130	0= OTAL		OR	TOTAL	
					<i>(</i> 6 :	.	ADDIT.			OR ,	ADDIT. FEE	
	,	Cl	lumn 1) LAIMS		(Column 2) HIGHEST	(Column 3)		_	ADD	1 .		ADD!
ENT B		REM A	MAINING AFTER INDMENT	,	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*		Minus	**	=	X\$ 9	9=		OR	X\$18=	
\ME	Independent	*		Minus	***	=	X39)=		OR	X78=	
ightharpoons	FIRST PRESE	:NTATI	ON OF MI	ULTIPLE DE	PENDENT CLAIM		l I					
/ da a a a a a a a a a a a a a a a a a a								0= OTAL		OR	+260=	
	•	M (Cor	aple	lipvA te	Эg	ADDIT.	FEE		OR	TOTAL ADDIT. FEE	
	<u> </u>		lumn 1)	T	(Column 2)	(Column 3)				,		
ENT C		REM	LAIMS MAINING AFTER INDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
IDMI	Total	*		Minus	**	=	X\$ 9)= .	1	OR	X\$18=	
AMENDMENT	Independent			Minus	***	=	X39		 	1	X78=	
A	FIRST PRESE	NTATIO	ON OF MU	ULTIPLE DE	PENDENT CLAIM		1 ^35	, <u>-</u> 		OR	1,10=	
							+130) <u>=</u>		OR	+260=	
***	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											